



FENWICK & WEST LLP

SAN FRANCISCO OFFICE | EMBARCADERO CENTER WEST

275 BATTERY ST., SUITE 1500 | SAN FRANCISCO, CA 94111

TEL 415.875.2300 | FAX 415.281.1350 | WWW.FENWICK.COM

**RECEIVED
CENTRAL FAX CENTER****FACSIMILE TRANSMISSION****OCT 20 2005****CONFIDENTIAL**

DATE: October 20, 2005

CLIENT-MATTER NO.: 23540-10616
23540-10726
23540-10727
23540-10728

To:

NAME	FAX NO.	PHONE NO.
U.S. Patent and Trademark Office Central Fax Number	(571) 273-8300	

FROM: Michael J. Shuster

PHONE: (415) 875-2413

SENT BY: Tomika Thomas

PHONE: (415) 875-2474

NUMBER OF PAGES WITH COVER PAGE: 10	ORIGINAL WILL NOT FOLLOW
MESSAGE: <ul style="list-style-type: none">• REVOCATION AND POWER OF ATTORNEY;• STATEMENT UNDER 37 CFR 3.73(B)<ul style="list-style-type: none">Appln. No.: 09/927,315Appln. No.: 10/190,417Appln. No.: 10/645,441Appln. No.: 10/679,102	

CAUTION - CONFIDENTIAL

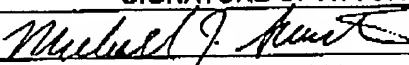
THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

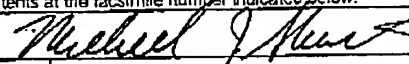
IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR,
PLEASE CALL TOMIKA THOMAS AT (415) 875-2474 AS SOON AS POSSIBLE.

+

TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>	Application Number	NA	
	Filing Date	NA	
	First Named Inventor	NA	
	Group Art Unit Number	NA	
	Examiner Name	NA	
Total Number of Pages in This Submission	10	Attorney Docket Number	

ENCLOSURES <i>(check all that apply)</i>	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) []
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply, Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References	<input checked="" type="checkbox"/> Statement under 37 CFR 3.73(b) (4 pgs)
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appln. No.: 09/927,315
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/> Appln. No.: 10/190,417
<input type="checkbox"/> Amendment/Response: [] Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/> Appln. No.: 10/645,441 (w/Assignment - Not for Recordation)
<input type="checkbox"/> Status Request	<input type="checkbox"/> Appln. No.: 10/679,102
<input checked="" type="checkbox"/> Revocation and Power of Attorney (1 pg)	<input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT		
Signature:		
Attorney/Reg. No.:	Michael J. Shustar, Reg. No.: 41,310	Dated: October 20, 2005

CERTIFICATE OF FACSIMILE TRANSMISSION		
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.		
Signature:		
Typed or Printed Name:	Michael J. Shustar	Dated: October 20, 2005
Facsimile Number:	1-571-273-8300	

23540/01000/SF/5153702.1

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b)

I hereby appoint:

☒ Practitioners associated with the Customer Number

758

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).


Assignee Name and Address:

The Regents of the University of California
A California Corporation
1111 Franklin Street, Twelfth Floor
Oakland, CA 94607-5200

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Linda S. Stevenson	Date	July 27, 2005
Signature		Telephone	(510) 587-6000
Title	Manager, Patent Prosecution		

23540/10616/SF/5148081.1

415 281 1350
RECEIVED
CENTRAL FAX CENTER

OCT 20 2005

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Zuker, Charles S.Application No./Patent No.: 10/645,441Filed/Issue Date: August 20, 2003Entitled: Mammalian Sweet Taste ReceptorsThe Regents of the University of California, aUniversity

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☒ an assignee of less than the entire right, title and interest.
 The extent (by percentage) of its ownership interest is 50%
 in the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

October 20, 2005
 Date

(415) 875-2413
 Telephone number

Michael J. Shuster

Typed or printed name

Michael J. Shuster
 Signature

Attorney

Title

23540-10727US (UC Ref. No.: 2001-510-5)

23540/01000/SF/5151720.1